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TRANSMITTAL FORM				First Named Inventor		November 12, 2003 John Kaewell			
				Art Unit		2611			
				Examiner Name		Bolourchi			
(to be used for all correspondence after initial filing)				Attorney Docket Number					
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				Drawing(s) Licensing-related Papers	After Allowance Communication to TO Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC				
After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request			Petition Petition to Convert to a Provisional Application Power of Attorney, Revoca Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on	e Address	Address (Appeal Notice, Brief, Reply Brief,			y Brief)	
		SIGNA	TURE C	OF APPLICANT, ATT	ORNEY,	OR AGENT			
Firm Name	VOLP,	E,AND KOEN	G, P.C.						
Signature	Pulu	i la i l							
Printed name	Rober	t D. Leonard							
Date	MAY 4 700		Reg. No.		57,204				
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Signature ////////////////////////////////////			,						
Typed or printed name Robert D. Leon		onard			Date	MAY	И	2007	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (01-06)

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	For FY	2006		First Name	d Inventor	John Kaewell				
Applicant cla	Examiner N	lame	Nader Bolourchi							
	Art Unit		2611							
TOTAL AMOUN	T OF PAYMENT	(\$)	130.00	Attorney Do	ocket No.	I-2-0118.1	US			
METHOD OF F	PAYMENT (chec	k all that ap	oply)							
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 09-0435 Deposit Account Name: InterDigital Communications Corporation										
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Design	200		100	50	130				•	
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Reissue	300		500	250	600	• • • • • • • • • • • • • • • • • • • •				
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2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues)										
Multiple der	pendent claims	,				3	360	180		
Total Claims		<u>Claims</u>	Fee (\$) Fee	e Paid (\$)		Multiple Dependent Claims				
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HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE 1. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
- 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)										
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lame (Print/Type)	Robert D. Leonard	t		(Attorney/Agen	.,,		Date MAY	1 4 7mm		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.